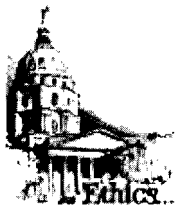


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**Campaign Finance  
Appointment of Treasurer or  
Candidate Committee Form  
For Candidate For State Office**

Governmental Ethics Commission  
901 S. Kansas Avenue  
Topeka, KS 66612  
Phone (785) 296-4219  
Fax (785) 296-2548  
[ethics.kansas.gov](http://ethics.kansas.gov)

This is an (Check one) ☒ **Initial Appointment** ☐ **Amended Statement**

**Candidate** Candidate Name: **Kris W Kobach**  
Address: **PO Box 1993**  
Address2:  
City: **Topeka** Zip: **66601**  
Home Phone: **(913) 731-6602** Business Phone: Cell Phone:  
County: Email Address: **kris@kriskobach.com**  
Office Sought: **Governor** District No.:

**Treasurer** Date Appointed: **06/07/2017**  
Treasurer Name: **Bob Dool**  
Address: **PO Box 1993**  
Address2:  
City: **Topeka** State: **KS** Zip: **66601**  
Home Telephone: **(913) 731-6602** Business Phone: Cell Phone:  
Email Address: **info@kriskobach.com**

**Candidate** Date Appointed:  
**Committee** Chairperson's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:  
Email Address:

Date Appointed:  
Treasurer's Name:  
Address:  
Address2:  
City: State: Zip:  
Home Telephone: Business Phone: Cell Phone:

Email Address:

**I declare that this statement has been examined by me and to the best of my knowledge and belief is true, correct and complete. I understand that the intentional failure to file this document or intentionally filing a false document is a class A misdemeanor.**

Executed on:

Date: **6/7/2017 6:21:28 PM** Signature of Candidate: **Kris W Kobach**

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